DISCLOSURE SUMMARY	1 /	[DR-2	DISCLOSURE
COMMITTEE NAME Must be same as on Statement of Clarke W. Upublican Ex	Ordanization) A STANIO	(Re	ev. 12/2005)	REPORT
Clarko lo Republican Cer	tras comm.	For	Office Use Or	Ily and
	2003 1511 14.08		nm. #	9039
IMPORTANT. Indicate building of committee you are constitution.	200 JAN 15 AB 10: 0.	3 1	ged In	
IMPORTANT: indicate by # type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candidate.		1 1		
(4) County Central Committee (5) County Candidate (6) City	Candidate (7)School Board or Other Political	1 1		
Subdivision Candidate (8) County PAC (9) City PAC (10) So (11) Local Ballot Issue	chool Board of Other Political Subdivision PAC			
CANDIDATE COMMITTEES ONLY:		=		
	Political Party (if applicable)	, ,	le with:	_
Candidate Name	Political Party (II applicable)		wa Ethics and isclosure Boan	
			10 E. 12 th , Ste.	
Office Sought	District (if Senate or House)		es Moines, low	
		Fa	ax: 515-281-37	UI
Late reports are subject to possible civil and criminal penaltie	s Purcuant to Java Code section 689 32A(7)	-		
the candidate, for a candidate's committee, and the chairpers				
individual responsible for filing timely and accurate reports.	•			to .
				· 1
)M - SK	1411244		1	111
Maurice Saringer SIGNATURE OF PERSON FILING REPORT	641-342-62 TELEPHONE	46		14 100
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	IGNED'
		i 1		e in the control of the second
I AM FILING A 1-1-07 to 12-31-	07 REPORT FOR (1) ELECTION /(2)NON-EI	LECTION YE	AR.
(report date)	Indicate by #	2		
CHECK IF AMENDMENT TO REPORT DATED	Loc	cal Comm	ittees, enter Oa	te of Election
☐ Check if this is final (termination) report and attach Not	ice of Dissolution Form DR 3			
(You must continue to file reports until a DR-3 is	flod /	unty & Locich Electic		, enter County in
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Wil	ich Electic	n is neid	
	<i>11</i>			
New part of annual and the second sec	<i>I</i> *			The state of the s
STATE	EMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period.	(Total of all funds held by the			
committee. This amount MUST be the same as	the cash on hand at the end	_	71	5.04
of the last reporting period or must be zero if this	is first report filed.)	\$		5,01
ADD TOTAL MONEY TAKEN IN THIS PERIOD			. , .	,
Schedule A: Cash Contributions total (Attach Sc	hedule A) (*also see in-kind below)		61	1.21
Schedule F: Loans Received total (Attach Sched	dule F)			
Schedule H: Total Sales of Campaign Property (•			;
(Schedule H applies to Candidates' C				
(Schedule in applies to Candidates C			121	125
	SUB-TOTAL	> ~	121	0,0 V
SUBTRACT TOTAL MONEY SPENT THIS PER			. 17	0 6
Schedule B: Expenditures total (Attach Schedule	•		_/5	8.80
Schedule F: Loan Repayments total (Attach Sch	edule F)			
CASH ON HAND at the end of this reporting period (if final	i report balance must		1.1 1-	77 17
be zero) (Attach DR-3)	••••••	\$	1/2	1.43
			The state of the s	- and the state of
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach S				
**OUTSTANDING LOANS (From Schedule F - Attach Sch	edule F)	\$		
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES	NO
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H.	Attach Schedule H)	\$		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - STATE COMMITTEES: Submit a reconciled campaign ac		\$		

FORM

FOR INSTRUCTIONS, SEE BACK OF FORM

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Most be same as on Statement of Organization)

CLARKE CO Republican Central Control

	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
•		CK THIS BOX IF NDING FORM

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOF FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
1 /	ID#	Iowa Telecom		\$	
1/19/07	CK#	(phone refund)		69.45	
1/2/	ID#	Lorae Barber		12.12	
12/07	CK#	ascerba Sowa		339.70	/
8/11	ID#	Ruth andelhelm	*	1	
11/07	CK#	Osceola, Dowa		25.00	1:
8/31/	ID#	gae Johnston		7	
/07	CK#	1408 Grade Fope, asceol		100,00	
10/23/	ID#	Warren Keefer		:/ ^	
107	CK#	asciola Ja 116W. Mc fa	ne	40.00	L
11/2/	ID#	Roger Miller &		,	
107	CK#	Starline an Claceola		25,00	
12/1	ID#	mike Baldon	*	12,00	
10/07	CK#	321 E. McJane Osceok		12,00	1
	ID#				
	CK#				
	ID#				[
	CK#				
	ID#				·
	CK#		·		
		1	SUB-TOTAL	\$611.21	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

\$

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

Clan	E NAME (Must be be Co, Ref	same as on Statement of Organization) whican Central Com	mittee	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/26/07	CK#	Kim Reynolds 1010A Ponksane	for Holiday Truit Bash	\$ 50.
6/19/01	ID# CK#	Howers & More 100 M. Main Asceola, Ja.	Howen for Kath Brown Juneral Central Conson Member	31,03
6/19/01	ID# CK#	Postmaster Osceolo Jowa	Stamped Envelopes	77.77
. ,	ID# CK#			
	ID# CK#			
	ID# CK#		·	
	ID# CK#			
	ID# CK#			A COLUMN TO THE
			SUB-TOTAL TOTAL (if last page of this schedule)	\$158.80

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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